

Affidavit of Applicant A

Check one ☐ Bride ☐ Groom ☐ Spouse

Must be filled in by Applicant A

Applicant A

<div>State of WASHINGTON County of Lincoln</div> <div>The undersigned, being first duly sworn, deposes as follows: That I am eighteen years of age or older and that if I am afflicted with any contagious sexually transmitted disease, the condition is known to Applicant B; and further, that I do not currently have a spouse or a registered domestic partner other than Applicant B and that I am not related to Applicant B.</div>	<div>Birthdate _____ Age _____</div> <div>Birthplace _____</div> <div><input type="checkbox"/> Single <input type="checkbox"/> Widowed <input type="checkbox"/> Divorced</div> <div><input type="checkbox"/> Under Control of Guardian <input type="checkbox"/> Registered Domestic Partnership</div>	<div>_____</div> <div>Print Name in Full</div> <div>_____</div> <div>X</div> <div>_____</div> <div>Signature in Full</div> <div>Subscribed and Sworn to before me on</div> <div>_____</div> <div>day month year</div> <div>_____</div> <div>Deputy Auditor/Notary Public</div>
	<div>Address _____</div> <div>(present) _____ Street _____</div> <div>_____ City _____ State _____ Zip _____</div>	
	<div>Address _____</div> <div>(Past 6 Months) _____ Street _____</div> <div>_____ City _____ State _____ Zip _____</div>	
<div>Marriage license is not valid for three (3) days from date of application and is void if marriage is not solemnized in the State of Washington within sixty (60) days of issuance of license.</div>		

Affidavit of Applicant B

Check one ☐ Bride ☐ Groom ☐ Spouse

Must be filled in by Applicant B

Applicant B

<div>State of WASHINGTON County of Lincoln</div> <div>The undersigned, being first duly sworn, deposes as follows: That I am eighteen years of age or older and that if I am afflicted with any contagious sexually transmitted disease, the condition is known to Applicant A; and further, that I do not currently have a spouse or a registered domestic partner other than Applicant A and that I am not related to Applicant A.</div>	<div>Birthdate _____ Age _____</div> <div>Birthplace _____</div> <div><input type="checkbox"/> Single <input type="checkbox"/> Widowed <input type="checkbox"/> Divorced</div> <div><input type="checkbox"/> Under Control of Guardian <input type="checkbox"/> Registered Domestic Partnership</div>	<div>_____</div> <div>Print Name in Full</div> <div>_____</div> <div>X</div> <div>_____</div> <div>Signature in Full</div> <div>Subscribed and Sworn to before me on</div> <div>_____</div> <div>day month year</div> <div>_____</div> <div>Deputy Auditor/Notary Public</div>
	<div>Address _____</div> <div>(present) _____ Street _____</div> <div>_____ City _____ State _____ Zip _____</div>	
	<div>Address _____</div> <div>(Past 6 Months) _____ Street _____</div> <div>_____ City _____ State _____ Zip _____</div>	
<div>Marriage license is not valid for three (3) days from date of application and is void if marriage is not solemnized in the State of Washington within sixty (60) days of issuance of license.</div>		

Parents' or Guardians' Consent

<div><div>Applicant A</div><div>I hereby certify that I am (Parent-Guardian) of _____</div><div>Who is _____ years of age and give my full consent to their marriage to _____</div><div>_____</div><div>X</div><div>Signature Parent/Guardian of Applicant A</div></div>	<div><div>Applicant B</div><div>I hereby certify that I am (Parent-Guardian) of _____</div><div>Who is _____ years of age and give my full consent to their marriage to _____</div><div>_____</div><div>X</div><div>Signature Parent/Guardian of Applicant B</div></div>	<div>Subscribed and Sworn to before me on</div> <div>_____</div> <div>day month year</div> <div>_____</div> <div>Deputy Auditor/Notary Public</div>
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